CAVERSTEDE NURSERY SCHOOL

Internal use only
Reference no:
Date received:

Employment Application Form

We are committed to safeguarding and promoting the welfare of children and young people and expect all staff and volunteers to share this commitment.

Please ensure that you complete **all** sections of Part 1 and Part 2 of the application. Please note that providing false information will result in the application being rejected, withdrawal of any offer of employment, summary dismissal if you are in post, and possible referral to the police. Please note that checks may be carried out to verify the contents of your application form. Please complete the form in black ink or type. CVs are not accepted.

Vacancy job title:	CLEANER

Part 1: Information for Shortlisting and Interviewing

Initials _____ **Surname or Family Name** _____

1. Current/Most Recent Employment:

Name and address of employer:	
Job title: Please enclose a copy of the job description, if possible	
Date appointed to current post:	
Current salary:	
Date available to begin new job:	

2. Full Chronological History

Please provide a full history in date order, most recent first, since leaving secondary education, including periods of any post-secondary education/training, and part-time and voluntary work as well as full time employment, with start and end dates, explanations for periods not in employment or education/training, and reasons for leaving employment.

Job title or positon	Name and address of school, other employer, or description of activity	Number on roll and type of school, if applicable	Full or part-time	Dates (DD/MM/YYYY)		Reason for leaving
				From	To	

Please enclose a continuation sheet if necessary.

3. Secondary Education and Qualifications (e.g. GCSE)

Name of school/college	From	To	Examination passed (i.e. A Level, GCSE), subject and grade

4. Further or Higher Education

Please provide details of any recognised qualifications or courses attended which are relevant to the job application.

Name of FE college, university or awarding body	Dates		Full or part-time	Qualifications obtained
	From	To		

5. Other Relevant Experience, Interests and Skills

6. Referees

Please provide details of two people to whom reference may be made. The first referee should normally be your present or most recent Headteacher or equivalent person. If you are not currently working with children please provide a referee from your most recent employment involving children. Referees will be asked about all disciplinary offences which may include those where the penalty is "time expired" if related to children. Referees will also be asked whether you have been the subject of any child protection concerns, and if so, the outcome of any enquiry. References will not be accepted from relatives or from people writing solely in the capacity of friends.

It is normal practice to take up references on shortlisted candidates prior to interview. This is in line with the most recent version of Keeping Children Safe in Education statutory guidance.

First Referee

Title and name:	
Address and postcode:	
Telephone number:	
Email address:	
Job title:	
Relationship to applicant:	

I consent to this reference being requested before interview.

Yes ☐ No ☐

Second Referee

Title and name:	
Address and postcode:	
Telephone number:	
Email address:	
Job title:	
Relationship to applicant:	

I consent to this reference being requested before interview.

Yes ☐ No ☐

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Part 2

Internal Ref. No. _____

This section will be separated from Part 1 on receipt. Relevant responses may be verified prior to shortlisting and/or used for administration purposes but will not then be used for selection purposes.

7. Personal Information

1. Surname or family name:			
2. Forenames:			
3. Title:			
4. Current address:			
5. Postcode:			
6. Home telephone number:			
7. Mobile telephone number:			
8. Email address:			
9. Do you have a current full clean driving licence? *Only applicable for posts that require driving*	Yes	No	N/A
10. Do you require sponsorship (previously a work permit)?	Yes	No	**If YES please provide details under separate cover.**

8. Compulsory Declaration of any Convictions, Cautions or Reprimands, Warnings or Bind-overs

It is the School's policy to require all applicants for employment to disclose any previous 'unspent' criminal convictions and any cautions which have not expired, or any pending prosecutions. In addition, the job you are applying for is exempt from the provisions of the Rehabilitation of Offenders Act 1974 (exceptions order 1975) which requires you to disclose all spent convictions and cautions **except** those which are 'protected' under Police Act 1997 – Part V and the amendments to the Exceptions Order 1975 (2013) and are not subject to disclosure to employers on DBS certificates and cannot be taken into account. Guidance on the filtering of "protected" cautions and convictions which do not need to be disclosed by a job applicant can be found on the Disclosure and Barring Service website.

If you are invited to interview you will be required to complete a "Disclosure of Criminal Record" form and bring the completed form to interview. If the job involves contact with children up to age 8 you will also be required to make a Disqualification Declaration. The information you give will be treated as strictly confidential. Disclosure of a conviction, caution, bind-over order, warning or reprimand will not automatically disqualify you from consideration. Any offence will only be taken into consideration if it is one which would make you unsuitable for the type of work you are applying for. However, offences relating to children may make you unsuitable since this is a "regulated position" under the Criminal Justice & Courts Services Act 2000.

9. Data Protection

The information collected on this form will be used in compliance with Data Protection regulations. By supplying information, you are giving your consent, if appointed, to the information being processed for all employment purposes as defined by statute. The information may be disclosed, as appropriate, to the governors, to Occupational Health, to the Teachers Pensions Agency, to the Department for Education, to pension, payroll and personnel providers and relevant statutory bodies. This form will be kept strictly confidential but may be photocopied and may be transmitted electronically for use by those entitled to see the information as part of the recruitment process. When the recruitment process is completed, your form will be stored securely for a maximum of six months then securely destroyed, unless you are employed as a result of this recruitment process in which case this application form will be retained as part of your personnel record.

10. Notes

(a) Under the Criminal Justice & Courts Services Act 2000 it is an offence for an individual who has been disqualified from working with children to knowingly apply for, offer to do, accept, or do any work in a 'regulated position'. The position you are applying for is a "regulated position".

(b) Canvassing, directly or indirectly, an employee or governor will disqualify the application.

(c) Candidates recommended for appointment will be required to provide a satisfactory Enhanced DBS certificate and complete a pre-employment medical questionnaire and may be required to undergo a medical examination.

(d) This organisation is under a duty to protect the public funds it administers, and to this end may use the information you may provide as part of the recruitment process for the prevention and detection of fraud. It may also share this information with statutory bodies responsible for auditing or administering public funds for these purposes.

11. Declaration

I certify that, to the best of my knowledge and belief, all particulars included in my application are correct. I understand and accept that providing false information will result in my application being rejected or withdrawal of any offer of employment, or summary dismissal if I am in post, and possible referral to the police. I understand and accept that the information I have provided may be used in accordance with paragraph 10 above, and in particular that checks may be carried out to verify the contents of my application form.

Signature of Applicant: _____

Print Name: _____

Date: _____

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Part 3: Equality and Diversity Monitoring

This section will be separated from part 1 and part 2. Collection of equality information is solely for monitoring purposes to ensure that our policies and procedures are effective. We also collect this data in accordance with the general and specific public sector equality duties under the Equality Act 2010. Any data you enter onto this monitoring form will only be used for monitoring purposes and will not be used in assessing and or scoring your application or during the interview process. This information is kept fully confidential and access is strictly limited in accordance with the Data Protection Act.

Ethnicity	Workforce census code		Please tick
White	WBRI	British English Welsh Northern Irish Scottish	
	WIRI	Irish	
	WIRT	Traveller of Irish Heritage	
	WROM	Gypsy / Roma	
	WOTH	Any other White background	
Mixed	MWBC	White and Black Caribbean	
	MWBA	White and Black African	
	MWAS	White and Asian	
	MOTH	Any other Mixed background	
Asian or Asian British	AIND	Indian	
	APKN	Pakistani	
	ABAN	Bangladeshi	
	CHNE	Chinese	
	AOTH	Any other Asian background	
Black or Black British	BCRB	Black – Caribbean	
	BAFR	Black – African	
	BOTH	Any other Black background	
Other ethnic group	ARAB	Arab	
	CHNE	Chinese	
	REFU	Refused/Prefer Not to Say	
	OOTH	Any other ethnic group	

Sexual orientation	Please tick
Bi-sexual	
Gay Man	
Gay Woman	
Heterosexual	
Other	
Prefer not to say	

Gender	Please tick
Female	
Male	
Transgender	
Prefer not to say	

Personal relationship	Please tick
Single	
Living together	
Married	
Civil Partnership	
Prefer not to say	

Religion or belief	Please tick
No religion	
Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	
Buddhist	
Hindu	
Jewish	
Muslim	
Sikh	
Any other religion (Write in)	
Prefer not to say	

Disability *Do you consider that you have a disability?*	Please tick
Yes - Please complete the grid below	
No	
Prefer not to say	
My disability is:	
Physical Impairment	
Sensory Impairment	
Mental Health Condition	
Learning Disability/ Difficulty	
Long standing illness	
Other	
Prefer not to say	